MAR 0 3 2008 PTO/SB/21 (04-07) Approved for use through 09/30/2007. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/728,106 TRANSMITTAL Filing Date 12/03/2003 First Named Inventor **FORM** Shubha Kadambe Art Unit 2626 Examiner Name Huyen X. Vo (to be used for all correspondence after initial filing) Attorney Docket Number HRI 132 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC ✓ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC ✓ Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Return Receipt Postcard; Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks

Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition to Withdraw Holding of Abandonment; Petition to Revive Application Unintentionally Abandoned Fee transmittal Credit Card Form Response/Amendment			
	SIGNA	TURE OF APPLICANT, A	TTORNEY,	OR AGENT	
Firm Name	Tope-McKay & Associate	es			
Signature		•			
Printed name	Cary Tope-McKay	\.\.			
Date	02/27/2008		Reg. No.	41,350	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

the date shown below:

Typed or printed name

Cary Tope-McKay

Signature

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

02/27/2008

Copy of return postcard stamped by
USPTU on 09/26/2007.

MAR 03 2008

Serial/Patent No: 10/728,105	Mailing Date: 9/21/2007					
Atty, Ref. No.: HRL132	Attorney Cary Tono McKoy					
Title: Method And Apparatus For Fast On-Line Automatic Speaker/ Environment						
Applicant: Shubha Kadambe	p and a minimum.					
The following, due 10/31/2007 in th	e II C Potent & Trademant OCC					
The following, due 10/31/2007 in the U.S. Patent & Trademark Office, was received in the U.S. Patent & Trademark Office Mail Room on the date stamped hereon:						
Potent A militarian						
Patent Application, including:	V					
	X Amendment/Response					
Pages of Specification, including:	Petition for Extension of Time (mths)					
Claims	Amendment After Final Rejection					
Page Abstract	Preliminary Amendment					
Formal/Informal Drawings She						
X Transmittal Letter	Notice of Appeal					
Combined Declaration/Power of Attorn	ney Appeal Brief					
Assignment with Form PTO 1619						
For Colonia and the second	2 6 2007 S   Issue Fee Transmittal					
Priority Document(s)						
	PCT Request Form					
IDS w/Form PTO 1449 w/	PCT Demand Form					
IDS w/Form PTO 1449 w/ references CREDIT CARD PAYMENT FORM	THADE Check No. for \$					
The state of the s	i ute attioution in a second second					
<ul> <li>X CERTIFICATE OF MAILING/EXPRE</li> </ul>	SS MAIL NO.					